

## PART IV

### CHILD HEALTH AND NUTRITION

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#### INTRODUCTION

When I was asked to write an introduction to the three papers in this section, I realised that although they had been written from different angles, they were all concerned with the welfare of the pre-school child in Ghana. Pre-school children in Ghana, as in most developing countries, are still among the most vulnerable in the society. Many factors contribute to their poor condition. Among these are poor nutrition, inadequate health services, poor environmental sanitation leading to infections and infestations, poverty and ignorance. It is useful to have our attention drawn to these problems in the context of family research.

Dr Ofosu-Amaah's paper attempts to describe the effect of attendance at Child-Welfare Clinics in Accra on the growth of the children. He has attempted to find out the inter-relation of factors such as socio-economic background and attendance at clinics where facilities for immunizations, malaria prophylaxis, disease control are available. He has correlated these factors with the nutritional status of the children. The findings are supported by data collected on 742 children.

Miss Gordon has given a comprehensive review of family conditions as they prevail in the Upper Region, where she has been working for the past five years. She has outlined her attempts at undertaking and evaluating nutrition education programmes in this region and has pointed out all the difficulties involved for any such programme to be effective e.g. lack of clean water, shortage of food and fuel, and poverty.

Mrs Nsarko has reviewed some of the existing practices in Child-Day care centres in Ghana. She has advanced arguments on how to improve the nutritional status and food habits of children through group feeding. She has also reviewed and stressed the importance of school lunch programmes as practised in the developed countries.

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